Campaign Finance Report Short Form EB-2a State Elections Board	<i>•</i> √
Spring Fall Special Pre-Primary	Continuing Report due Jan. 31,
Spring T Fall Special Pre-Election 🗶	Continuing Report due July 20,
Ruckley for County Name of Candidate or Committee (in full) 3266 West Point Rd Address (number and street) Green Bay WI City, State, Zip 5431	,
I certify that the above named committee or candidate make disbursements, or incur obligations during the p balance remains the same as previously reported. Th 11.06(9), Stats.	period covered by this report and that the cash
Signature of Committee Treasurer or Candidate	Date Daytime Phone 3-05-14 920 965-650
EB-2a (Rev. 9/95) (Reformatted 3/98) (Y2K 9/99)	· · · · · · · · · · · · · · · · · · ·



SHORT FORM – Use For "No Activity" Reporting Period

	IN FINANCE REPORMITTEES OF WISC	RT ONSIN	£222324285
Is This Report an Amendment: Yes	⊠ No	ONSIN (2)	PEO -
Instructions for completing schedules are on the ba		6	MAR 2014
COMMITTEE IDENTIFICATION		2	MAR 2014 8
Name of Committee	ckett		Sandra L. Juno Brown County Clerk
City, State and Zip Code			
Green Bay, WI 54311			
Please check if address is different than previously reported, a	nd complete the Campaign F	Registration Statement in t	he back of this form.
NAME OF REPORT			·
✓ January Continuing Pre-Primary	Spring	Special .	Termination Report
☐ July Continuing Pre-Election 30/4	Spring Fall	Special	also complete Schedule 4
SUMMARY OF RECEIPTS AND			
DISBURSEMENTS	Column A This Period	Column B Calendar	
1. RECEIPTS	1030	Year-To-Date	
1A. Contributions (Including Loans) from Individuals	\$ 1000 , 00	\$ 685.00	
1B. Contributions from Committees (Transfers-In)	\$	\$	
1C. Other Income and Commercial Loans	\$ 0	\$	
TOTAL RECEIPTS (Add totals from 1A, IB and 1C)	\$ 100	\$	<u> </u>
2. DISBURSEMENTS	1050		
2A. Gross Expenditures	s 836 1096	6./S_	
2B. Contributions to Committees (Transfers-Out)	\$	\$	
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$	\$	
CASH SUMMARY	. *		
Cash Balance Beginning of Report	\$ 685.00		
Total Receipts	\$/050	ě.	•
Subtotal	s 1735	·	9
Total Disbursements	\$ 965.15	Amin a	
CASH BALANCE END OF REPORT	s 9	A769.85	·
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$		
LOANS (Balance at the Close of This Period-3B)	\$		
I certify that I have examined this report and to the best of	<u> </u>	it is true, correct and co	mplete. j
Type or Print Name of Candidate or Treasurer Sign	ature of Candidate or Treasurer	Date:	3/21/14
	- A // (a/ //)	//	· / / / / / /

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2L (Rev. 12/09) This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk.

Daytime Phone:

RECEIPTS Contributions (Including Loans) From Individuals

Page _____ of ____

Complete Com	mittee Name			•
Trier	1015 Of Sanay 1	<u>lucken</u>		
Date	or completing schedules are on the black of early. Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
2 / 14	1 Diane & Rick Roundy	Of Employment (if year-to-date total exceeds \$100)	,	Year-to-Date Total
	72248HANTKORIDAI		\$1000	2/1/2014
	1 5		7100	+
	Green Car. WI State	632		4785°
Date	Check if: In-Kind Loan Conduction Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place		Calendar
1 _		Of Employment (if year-to-date total exceeds \$100)	<i>L</i>	Year-to-Date Total
Q / 1 / / 7	Suzette Pfifter		450 M	5/1/14
	1545 Arapahoe Trai	1		
	Green Bay WI 543/3			7835 C
	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:		7 0 20
Date 0 1 1/1		Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
26,14	BOB & Sally Atwell		1000	2/1/14
•	3486 Solitude Rd	·	100	10/1
<u> </u>	DePere, W554115			\$935 00
,	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:	<u> </u>	190
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
タノノバ	Dannie 1 11 tanaha		1-10	2/2/14
	Dennis Lauterschlag 2500 Old Plank Rd		15:00	a/ ////
				\$ ALA 50
	De Perc, WI 54115 Check if Film-Kind Filman Conduit	Conduit Name:	jl	1000
Date	Check if: I In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar Year-to-Date Total
216114	Tom + Urula Hizz	Of Employment (if year-to-date total exceeds \$100)	4	2/1/2/14
	4684 Creek Valley Ln		50	0/10/1/
. '	Oneida, WI 54155		,	tintat
		Conduit Name:		4/0 6 0.
Date	Check if: ☐ In-Kind ☐ Loan☐ Conduit Full Name, Mailing Address and Zlp Code	Occupation, Name and Address of Principal Place	Amount	Calendar
2 1614	Dennis + Jandy Ouck	# Employment (if year-to-date total exceeds \$100)	٠,	Year-to-Date Total
, -	2552 Wilder ct		7/00.00	0/16/1
	Green Bay, WES431		7,00	AllEn 12
	'	<u> </u>	,	\$/1000.
Date	Check if: ☐ In-Kind ☐ Loan☐ Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar
311414	1 20 11 7	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
	1832 Fiesta Lr.		9/x7 10	3/14/1
	· · · · · ·		100	1. La R2
	Green Bay, WT 54311	1 - 1 - 1 - 2 - 1 - 1 - 1 - 1 - 1 - 1 -		14/260.0°
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:	Amount	Calendar
3 1/4/14	Theresa Matousat	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Airionte	Year-to-Date Total
~ 177114		· Comment	\$200	\$ 12 kg
	3135 St. Gregory Dr	IV-0	1.00	LI WW
	Green Bay, wt54311	_		
	Check if: ☐ In-Kind ☐ Loan☐ Conduit	Conduit Name:	. ,	,
	SURT	OTAL ITEMIZED CONTRIBUTIONS THIS PAGE	625.00	1
				1
		TOTAL ITEMIZED CONTRIBUTIONS	3	1
	TOTAL	UNITEMIZED CONTRIBUTIONS \$20 OR LESS	\$	
	TOTAL CO	NTRIBUTIONS RECEIVED FROM INDIVIDUALS	s 1710	
		2 of 4		- ·.
		- ·		

RECEIPTS Individuals Contributions from Committees

Page 2 of 3

(Trausfersaln)

Complete Committee Name	20	Sandy	Duck	le H	÷,
Instructions for completin	g scher	pules are on the	back of each schedul	ile.	

Calendar Joe & Suc Schinkten Year-To-Date Total \$100.00 Check if: In-Kind I Loan Calendar Amount Year-To-Date Total Amount Calendar Year-To-Date Total Check if: In-Kind I Loan Green Bay, WT 54301

Full Name of Committee, Mailing Address and Zip Code Calendar Amount Year-To-Date Total \$ 100 Calendar Date Amount 17,14 🖸 In-Kind 🔲 Loan Calendar Judy & Parrly Johnson 240 Lazarce Ave. Creen Bay, W Year-To-Date Total Check if: 🔯 In-Kind 🔯 Loan Calendar Date Full Name of Committee, Mailing Address and Zip Code Amount . Year-To-Date Total Check if: 🔲 In-Kind 🗖 Loan Date Full Name of Committee, Mailing Address and Zip Code Amount Calendar Year-To-Date Total Check if: 🔲 In-Kind 🔲 Loan Calendar Date Full Name of Committee, Mailing Address and Zip Code Amount Year-To-Date Total Check if: In-Kind Loan SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES

3 of 4

DISBURSEMENTS Gross Expenditures

Complete Comm	ittee Name	#	
tric	nds of Sandy Ducky	<u> </u>	·
	completing schedules are on the back of each schedule.		Amount
2 81.14	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Marie My Campaign 304 (2)Attination Pkyraut 201	Specific Purpose of Expenditure	452500
Date	Check if: In-Kirld Offset SVIIL HY 40022 Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount 32
2,9,14	G.T. Printing 1316 Belkvarst Wt 54302	Brochures	73/1.
2 25/4	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made My Cam Payment is Made	Specific Purpose of Expenditure Wincs for	129.15
Date	Check if: In-Kind Offset Full Name, Mailing Address and Zip Code	Vand 519n5 Specific Purpose of Expenditure	Amount
	Of Person or Business to Whom Payment is Made		
Date	Check if:	Specific Purpose of Expenditure	Amount
i i	Of Person or Business to Whom Payment is Made -		
Date	Check if:	Specific Purpose of Expenditure	Amount
1 1	OF GROWN OF BUSINESS TO WHOM PRAYMENT IS MADE		
	Check if:	·.	
Date / /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
	Check if:		
Date / /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
	Check if:		
Date /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
	Check if: 🔲 In-Kind Offset		045 15 965.
	SUBTOTAL IT	EMIZED EXPENDITURES THIS PAGE	\$ 500
		TOTAL ITEMIZED EXPENDITURES	s —
		MIZED EXPENDITURES \$20 OR LESS	\$ 945.15
End c	of Report*	TOTAL EXPENDITURES	\$ 7

CAMPAIGN FINANCE REPORT LOCAL COMMITTEES OF WISCONSIN Is This Report an Amendment: ☐ Yes ⊠ No Instructions for completing schedules are on the back of each schedule. **COMMITTEE IDENTIFICATION** Friends of Police Frans Green Bay, WI 54303-3307 Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. . *NAME OF REPORT* ☐ January Continuing Pre-Primary ____ ☐ Spring ☐ Fall Special Termination Report also complete Schedule 4 Spring ☐ Fall Special ☐ July Continuing Pre-Election 2014 SUMMARY OF RECEIPTS AND Column A Column B *DISBURSEMENTS* This Period Calendar Year-To-Date 1. RECEIPTS \$ -6-450.00 1A. Contributions (Including Loans) from Individuals \$ \$ -0-1B. Contributions from Committees (Transfers-In) - o -- ن -\$ 1C. Other Income and Commercial Loans -0----450.00 TOTAL RECEIPTS (Add totals from 1A, 1B and 1C) 2. DISBURSEMENTS 9-00 633.54 2A. Gross Expenditures \$ - -\$ 2B. Contributions to Committees (Transfers-Out) 633,54 TOTAL DISBURSEMENTS (Add totals from 2A and 2B) 9.00 CASH SUMMARY 172.33 Cash Balance Beginning of Report Total Receipts - 0 -Subtotal 172.33 9.00 **Total Disbursements** 163. 33 CASH BALANCE END OF REPORT INCURRED OBLIGATIONS (Balance at the Close of This Period-3A) LOANS (Balance at the Close of This Period-3B) \$ 7,100.00

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

JAYS. TIBBETTS, MD - Trassor Jay J. 5 Politills, NO Daytime Phone: 494-2265	Type or Print Name of Candidate or Treasurer	Signature of Candidate or Treasurer	Date: 3-20 -14
	JAY S. TIBBETTS, MD - TRADEN	Jay J. b Polithells, no	Daytime Phone: 494 2265

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2L (Rev. 12/09) This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk.

DISBURSEMENTS Gross Expenditures

Page ___ of ___

Complete Comm			
Friend	s of Patick Evan >		•
	completing schedules are on the back of each schedule.		
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
	Of Person or Business to Whom Payment is Made		
113114	Edward Jones 3313 S. Medicla-UD1. Butofit Departel 34115	Month of the (300/100)	
2-3-14	2313 S. parketa-UD1. Butofit	11/1/500	9.00
5	Devise pell 74115	Monte	
3-3-14	Check if: In-Kind Offset	(3°/10)	
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
	Of Person or Business to Whom Payment is Made		
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	·		
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	Check if: In-Kind Offset		
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
	Of Person or Business to Whom Payment is Made		
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	Check if: fr-Kind Offset		
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	Of Person or Business to Whom Payment is Made	, , ,	1
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	Check if: 🛘 In-Kind Offset		
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
, ,	Of Person or Business to Whom Payment is Made		
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Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
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	Check if: In-Kind Offset		
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
, ,	Of Person or Business to Whom Payment is Made		
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	Check if: In-Kind Offset	<u> </u>	
• ,,	and the same of th		
	je je je merie na sa	rewiten evnennitudes this pace	\$ 9.00
	SUBTOTALTI	remized expenditures this page	\$ 9.00
***	d of Donoutth	•	
⊏n	d of Report***	TOTAL ITEMIZED EXPENDITURES	\$ 9.00
:			
	TOTAL UNITE	MIZED EXPENDITURES \$20 OR LESS	\$
•	1 A A		
	20+2		9.00
		TOTAL EXPENDITURES	1.5 7.00.

	ON FINANCE REPO MITTEES OF WISC	CONTORNI	137A 2528222
Is This Report an Amendment:	□ No	ONSIN (1817)	
Instructions for completing schedules are on the ba	ack of each schedule.	/8	RECEIVED 3
COMMITTEE IDENTIFICATION	Manuf	(<u>5</u>	MAR 2014
Name of Committee	, ,	1/2	Sandra L. Juno
Street Address Com Street Address	typista		Sandra L. Junu Sandra County Chark Brown County Chark
2700 Humbold+ Ap+	4		SSTROP
City State and Zip Code Green Bay WT	<u>4311</u>	<u> </u>	
Please check if address is different than previously reported,		Registration Statement in t	the back of this form.
NAME OF REPORT			
January Continuing Pre-Primary	Spring Fal	I Special	
☐ July Continuing ☐ Pre-Election 2019			Termination Report
July Continuing Pre-Election	Spring	II Special	also complete Schedule 4
SUMMARY OF RECEIPTS AND	Column A	Column B	
DISBURSEMENTS	This Period	Calendar	
1. RECEIPTS	-	Year-To-Date	
IA. Contributions (Including Loans) from Individuals	\$ 30.00	\$ 830.00	
1B. Contributions from Committees (Transfers-In)	s	\$	ļ.
1C. Other Income and Commercial Loans	\$	\$	
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 130.00	s 830.00	1
2. DISBURSEMENTS		-	1
2A. Gross Expenditures	\$ 5.3	\$ 195.67	
2B. Contributions to Committees (Transfers-Out)	\$	\$ -]
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 5.4	\$ 195.67	1
CASH SUMMARY			
Cash Balance Beginning of Report	\$ 509.5°		
Total Receipts	\$ 130 00		
Subtotal	\$ 639.00		•
Total Disbursements	\$ 5.4	٠.	
CASH BALANCE END OF REPORT	\$ 634 33	·	
INCURRED OBLIGATIONS			
(Balance at the Close of This Period-3A)	\$		•
LOANS (Balance at the Close of This Period-3B)	\$		÷ .
I gestify that I have arguined this report and to the heat of	C	the internal command and co	men lata

Type or Print Name of Candidate or Treasurer	Signature of Candidate or Treasurer	Date: 03 - 24 - 2014
Staush bruszyuski	Manch 1) Jurgeporte	Daytime Phone: 920.216.3793
		•

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats. rts.

/ of 3

This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk.

RECEIPTS Contributions (Including Loans) From Individuals

Page ____ of ___

Complete Com	A . A			-
	es of Stauth Come	75/109ki		
Instructions for Date.	or completing schedules are on the back of ea Full Name, Mailing Address and Zip Code			Colondon
2014		Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
9 1031	John Smallward			Vision of the second
	Madison, WI		\$25.00	O THE O
	Check if:	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place		Calendar Voor to Poto Total
01 110 12014	Dennis Hughes Jr.	Of Employment (if year-to-date total exceeds \$100)	A10.00	Year-to-Date Total
	Milwanker, WI		410 =	
	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:	-	3
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
01/10/2049	Rachel Nutini	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
	* =	,	\$50.00	المرين
·	Appleton, WI			
	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:		1
02, 08, 204		Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
	Brett Anfinson	-	\$ 25 ce	\$ 25 °C
	Sun Prairie, WI		ψ <i>υ</i> ς,	
	Check if Clo-Kind Close Conduit	Conduit Name:		
Date	Check if: ☐ In-Kind ☐ Loan☐ Conduit Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
02/10/2014	Described of T	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
	De mis magnes or.	•	\$ 10.00	15 30.00
	Milwanker, wi		y 10.	
	Check if: ☐ In-Kind ☐ Loan☐ Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
03 / 10 / ZON		Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
2017	Dennis Hughes Ir.		\$ 10.00	\$ 40.00
	Milwanker, WI		Q 10.	
•	Toll Thomas A for			
	Check if: In-Kind In Loan Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
I. I			,	
		•		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
Date	- an realitio, maining Address and Alb Code	Of Employment (if year-to-date total exceeds \$100)	Anjount	Year-to-Date Total
_ / /	·			
•		en e		
		$\mathbf{v}_{i} = \left(\mathbf{v}_{i}^{(i)}, \mathbf{v}_{i}^{(i)}, \mathbf{v}_{i}^{(i)},$	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Check if: In-Kind I Loan Conduit	Conduit Name:		
		OTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 130.00	
		TOTAL ITEMIZED CONTRIBUTIONS	\$ 130.00	
	TOTAL	UNITEMIZED CONTRIBUTIONS \$20 OR LESS	s 0 -	_
and the second	TATAL AAL	TRIBUTIONS DECENTED FROM MISSISSIA A	s 120. %	

DISBURSEMENTS **Gross Expenditures**

Page of

Complete Committee Name Steway (grusting) instructions for completing schedules are on the back of each schedule. Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made 01/21/2019 Fees for Service FIST ST. CK 95131 Check if: In-Kind Offset Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made 03/19/201 格フ.21 Fees for Service Check if: In-Kind Offset Date Full Name, Mailing Address and Zip Code Amount Specific Purpose of Expenditure Of Person or Business to Whom Payment is Made Date Full Name, Mailing Address and Zip Code Amount Specific Purpose of Expenditure Of Person or Business to Whom Payment Is Made Check if: In-Kind Offset Date Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made Check if: In-Kind Offset Date Full Name, Mailing Address and Zip Code Amount Specific Purpose of Expenditure Of Person or Business to Whom Payment is Made Check if: In-Kind Offset Date Full Name, Mailing Address and Zip Code Amount Specific Purpose of Expenditure Of Person or Business to Whom Payment is Made Check if: In-Kind Offset Date Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made Check if: In-Kind Offset Full Name, Mailing Address and Zip Code Date Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made Check if: In-Kind Offset SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE ***End of Report*** TOTAL ITEMIZED EXPENDITURES TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS 3 of 3

TOTAL EXPENDITURES | \$

	GN FINANCE REPO IMITTEES OF WISC	RT CONSIN	6	RECEIVED MAR 2014
Is This Report an Amendment: Yes	⊠ No			
Instructions for completing schedules are on the b	ack of each schedule.		[ରୁଁ	RECEIVED I
COMMITTEE IDENTIFICATION			/87 195	MAR 2014
Name of Committee FRIENDS OF Julie Janson Street Address			LE GE	RECEIVED MAR 2014 Sandra L. Juno Brown County Clerk
Sity, State and Zip Code Oity, State and Zip Code	2		OR	CE SUFFORM
Green Bay. W: 54304				
Please check if address is different than previously reported,	and complete the Campaign	Registration St	atement in tl	ne back of this form. 🔲
NAME OF REPORT				
January Continuing Pre-Primary	Spring Fal	I 🔲 Spe	cial .	□ m
☐ July Continuing Pre-Election 3014	Spring	I Spe	cial	Termination Report also complete Schedule 4
SUMMARY OF RECEIPTS AND	Column A	Colum	ın B	
DISBURSEMENTS 1. RECEIPTS	This Period	Calen Year-To		`.
1A. Contributions (Including Loans) from Individuals	\$ 992.00	\$ 231	?5.00	,
IB. Contributions from Committees (Transfers-In)	\$ 550.00	\$ 55	0.00	
1C. Other Income and Commercial Loans	\$ 200.00	\$ 20	0.00	
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$1.742.00	\$3 135	5,00	
2. DISBURSEMENTS				
2A. Gross Expenditures	\$ 1,186.29	\$ 1,86	0.19	
2B. Contributions to Committees (Transfers-Out)	\$	\$	·	
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$1,186.29	\$ 1,80	0.19	
CASH SUMMARY				
Cash Balance Beginning of Report	\$ 719.10	:		
Total Receipts	\$1,742.00		•	
Subtotal	8461,10			•
Total Disbursements	8,186.29	· .		
CASH BALANCE END OF REPORT	\$274.81			
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$			
LOANS (Balance at the Close of This Period-3B)	\$			
I certify that I have examined this report and to the best o	f my knowledge and belief	it is true. cori	rect and con	nplete.

Type or Print Name of Candidate or Treasurer

Signature of Candidate or Treasurer

Date: 3/35/2014

Julie A. Jansch

Daytime Phone: 921 449 881

NOTE: The information on this form is required by ss.11.06,41.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

RECEIPTS Contributions (Including Loans) From Individuals

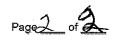


Complete Committee Name

	or completing schedules are on the back of e	ach schedule.		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
11/8/4	James Van Lagnen 4145 Van Lanen Rd		- 40)	
,	4145 VANLANEN KA		5000	
	Green Bay W. 54311		1	
	Check if: I In-Kind I Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:	-	
Date	1.00	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	·	Calendar Year-to-Date Total
1/13/14	Mike Micksch	[111100
	426 Easy ST	<u>;</u>	5000	100 -
	Concen Bay. Wi S4311	1 1 1)))	
	Check if: In-Kind L Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:		
Date		Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
21714	KRISVAN LAGNEN	,		Total to bate Total
	4155 Van Lanen Rd			
	GREENBAY.WI SY311	! !	100-	
		Conduit Name:	<u> </u>	
Date	the state of the s	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
2/15/14	Melinda Stacie			7921 13 5315 7011
	3069 Beth DR.	1 1 4 1	10000	
	Green Bay W:SIBI	1 1 1	100 -	
	Check if: U In-Kind U Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name;		
Date		Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
2/27/14	Caryl J. Peters		·	
	7507 Delvaus ST		50°	45.00
	Check If: Un-Kind Ucan Conduit Full Name, Mailing Address and Zip Code	•	10	
<u> </u>	Check if: In-Kind Loan Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
22714	Linda Queoff		ľ	
	1116 HighVew Lane		2500	
	GREENBAY WS4304		0,5	
Date	Check if: Li In-Kind Li Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:		
	•	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
2/27/14	Mancy Schultz 810 Menfuld ST			
	810 Mentuld ST		1000	
	Green Bar, W: S4304		/	
Date	Check if: U In-Kind U Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:	America	Colorado
	•	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
2/27/14	71'NA MEYER 2345 East-Shone Dir Coren Bay W. Sy3/1			
	2345 East Shull Die		10000	
İ		•	,00	
	Check if: I In-Kind LLoan Conduit	Conduit Name:		
•	SUBT	OTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 48500	
		TOTAL ITEMIZED CONTRIBUTIONS	\$	
	أعسيت		0	
	IOTAL	UNITEMIZED CONTRIBUTIONS \$20 OR LESS	\$	
	TOTAL COM	NTRIBUTIONS RECEIVED FROM INDIVIDUALS		•

2 of 6

RECEIPTS Contributions (Including Loans) From Individuals



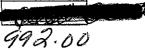
Complete Committee Name

Instructions to Date	r completing schedules are on the back of ea Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
215/11	Denise Servais	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
J J 14	3266 Haven Place		4000	
	3266 Haven 1200		40 -	
	Green Bay W.S4313	Conduit Name:		
Date	Check if: Li In-Kind Li Loan Conduit Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place		Calendar
3/6/14	Robyn Van Laanen	Of Employment (if year-to-date total exceeds \$100)	, }	Year-to-Date Total
36.1	3616 Heffron ST		5700	100
	Stevens Pt. W. SU481			
	i i	Conduit Name:	ļ	•
Date	Check if: Lin-Kind Li Loan Conduit Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
311114	James Soletski	or Employment (ii year to date interexected \$100)		Toda to bate rotal
	494 mento Park Rd		10000	
	GRENBAY,W: S4302		100-	
	Check if: I In-Kind I Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:		
Date	Math Gensul	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
3110/14	3409 Scotwood DR.	62	700	
	1: —	Professional Tri fightes	5000	
	GREEN BOY. W. SY311	The state of the s		
	Check if: Lu In-Kind Lu Loan Lu Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Solve 141 Onelut		
Date	- 11 // 4 . 6	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
3/10/14	Tim Hattendoef	GB 1		
	1145 Lawe ST	Drofersional Trefighler	100000	
	GREENBAY W: SY301		. •	
	Check if: U in-Kind U Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name Total AT Condus	A	Calendar
Date	1/10 100000100	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Year-to-Date Total
310114	Ryle Kentinecsies		اد	
	E 3201 Tabordon Lane	GB	10000	
	Cuseu, W. Syzus	PROFESS ON al Line Tightus Conduit Name: SOCAL 141 Conduit		
Data	Check if: Li In-Kind Li Loan Conduit	Conduit Name: BOCAL 141 Cendust	Amarina	Colondo
Date	Full Name, Mailing Address and Zip Code	Cocupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
5 14 141	Jean Linsmeyer 831 W.ST. Francis Rd Defere, W. Sulls		000	
• •	N. M. Cull		20 -	
	l l			
Date	Check if: I In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar
_	[^ · · · · · · · · · · · · · · · · · ·	Of Employment (if year-to-date total exceeds \$100)	FUIDOR	Year-to-Qate Total
2/2714	DIANE HOURG	·	11100	
	Sul mujuas		11	
l	When Bay woy		د	
	Check if: I In-Kind I Loan Conduit	Conduit Name:	50200	
	SUBT	OTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$	
		TOTAL ITEMIZED CONTRIBUTIONS	\$	
		TO THE ITEMIZED CONTINUES TONS	COMMISSION OF THE	500

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS | \$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

3 of 6



RECEIPTS Contributions from Committees (Transfers-in)

Page \underline{I} of $\underline{\mathcal{J}}$

Complete Committee	Namo
CONTINUED CONTINUEDE	
10	
FICLEDAS	of Julie Jansch

Instructions for completing schedules are on the back of each schedule.

3 / 12 /7	Full Name of Committee, Mailing Address and Zip Code Wisconsin People Conference 500380E	Amount B	Calendar Year-To-Date Total
J / / 2 / /	8033 Exculsion DR. Sente A.	20000	
	Check if: II In-Kind II Loan Madison. W. 53717 Full Name of Committee, Maifing Address and Zip Code	-	
Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
31314	Women In Numbers-PAC P.O. BOX 5486 W. 53705 Check if: [I] In-Kind [I] Loan Full Name of Committee, Mailing Address and Zip Code	10000	Total To Date Total
	madison, W. 53703	100	
Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar
311/14	RROWN Co. Dem Party	a. aa	Year-To-Date Total
	Check if: 1 In-Kind 1 Loan Grew Bay. W: 54304 Full Name of Committee, Mailing Address and Zip Code Gran Bay Labor Temple	2000	
Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
3/17/14	1500 Elizaheth ST.	T 00-	rear-10-Date rotal
	Check It: StrKind Loan GReen Bay. W; 5/304 Full Name of Committee, Mailing Address and Zip Code	30 -	
Date	Check II: In-King Li Loan Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar
/ /			Year-To-Date Total
. / /		:	
٠.	<u> </u>		
Date	Check if: U In-Kind U Loan Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar
	Full Name of Contralices, Maning Address and 2-p code	AHOUER	Year-To-Date Total
1 1			
	Check if: [1] In-Kind [2] Loan		
Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
1 1		,	, , , , , , , , , , , , , , , , , , , ,
			·
	Check if: Lu In-Kind Lu Loan		
Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar
1 1			Year-To-Date Total
	•		
	Charles III in 1874 III Lad		
Date	Check if:	Amount:	Calendar
			Year-To-Date Total
1 1			
-			<i>y</i> • • •
Data	Check if:	Amount .	Calendar
Date	From Name of Committee, Ivialing Address and ZIP Code	Amount	Year-To-Date Total
I = I		7	
١			
	Check if: U In-Kind U Loan		
	SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE	\$55000	
		an	
	TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES	1.5550 -	



RECEIPTSOther Income and Commercial Loans

Page 2 of 2

Complete Committee Name

Instructions for c	ompleting schedules are on the back of each schedule.		
Date	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
3 12114	O o a sale of moome	Reimbursement on Mailing	- 20
0 /2 /7	BILDWIN, W. Dellis 4 day	PACITIONIZSCINCIO	20000
	1185 CALSTOUT	on Mailing	Leve 5
Date	of Source of Income BROWN Co. Dem Party 18 5. Chr. Strut 6 New Bay W: 54302 Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	
Date	of Source of Income	type of income	Amount
1 1			
·	·		
Date	Full Name, Mailing Address and Zip Code	Type of Income	Amount
. , , ,	of Source of Income		
	}		
Date	Full Name, Mailing Address and Zip Code	Type of Income	Amount
1 1	of Source of Income		
.]	1		
Date	Full Name, Mailing Address and Zip Code	Type of Income	Amount
.	of Source of Income	Type of thousand	, vilouit
1 1			·
Date	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
	or Source or Income		[.
	İ		
Date	Full Name, Mailing Address and Zip Code	Type of Income	Amount
Date	of Source of Income	Type of fricome	Amount
. / /			<u> </u>
ļ			·
Date	Full Name, Mailing Address and Zip Code	Type of Income	Amount
1 1	of Source of Income		
Date	Full Name, Mailing Address and Zip Code	Type of Income	Amount
50.0	of Source of Income	Type of modifie	Amount
/ /			
Date	Full Name, Mailing Address and Zip Code	Type of Income	Amount
, ,]	of Source of Income	 .	
	ļ		
}	48.6 _{e.m.} ,	:	
		· · · · · · · · · · · · · · · · · · ·	
	_		1.30x 00
	SUBTOTAL	OTHER INCOME THIS PAGE	\$00.
	TOTA	L ITEMIZED OTHER INCOME	\$
	TOTAL HAUTER O	THER INCOME \$20 OR LESS	\$
	10 IAL UNITEMIZED C	THER INCOME \$20 OR LESS	
			21100
	50	TOTAL OTHER INCOME	Is ひひひ

DISBURSEMENTSGross Expenditures

Page Z of Z

Complete Committee Name
Friends of Julie Jansch

Instructions for	completing schedules are on the back of each schedule.	.	
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
21414	BROWN Co. GRAPHICS	PRINLING OF	711170
T 1 1	1136 CONFRACT Druck, Green Bay W		314.39
		DOOR Hangers	
Date	Full Name: Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
1 1 1 1 1 1 1	Of Person or Business to Whom Payment is Made	OFFICE	2
21914	Dollar General	1	9.50
1	:	Supplies	
	Check if: U In-Kind Offset		
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Mage	Specific Purpose of Expenditure	Amount
31711	USPS-Pacificaland Alrive	Stamps	150.00
	7,57,5	V	, 30
	Check if: In-Kind Offset		
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
311114	USPS - Packerhand Druie	Bulk Mailing	22711
	U-P3 - PUCKETRANA NORWE	Duck Formering	227.41
-	Check if: In-Kind Offset		
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
21/21/11		PRINLING OF	1
31/314			135.04
	1136 Contract Dr. Dreen Bay Wi	Post Cards	133.07
Date	Check if: 17 In-Kind Offset 5430 4 Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
	Of Person or Business to Whom Payment is Made	1	_
3 171 14	USPS - COSRIN Station	BUCK Mail	1229.95
	Check if: I In-Kind Offset	-	-
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
317114	Of Person or Business to Whom Payment is Made WOODONG GREEN Bay Labor Temple	Beeck Mail	50.00
		ŀ	
	Check if: X In-Kind Offset		
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
3 114/14	Mary Old Ninbaugh 1185! Chestrut, Greek W.; Check if: 11 In-Kind Offset	Reimbur sement	1200
	Mary Centurbaugh	,	30 -
·	Check if: 10 In-Kind Offset	Stamps	
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Arnount ·
3114114	Of Person or Business to Whom Payment is Made	Reimbunsement	mas.
3/9/9	BROWN Co. Dem Harry	} ·	20 -
	1185 Chestwut, Co Resubat W. Check if: I In-Kind Offiset 54304	Labels	
	Check if: LI In-Kind Offset 09009		<u> </u>
			\$ 1,186,29
	SUBTOTAL IT	EMIZED EXPENDITURES THIS PAGE	\$ 15100101
			}
		TOTAL ITEMIZED EXPENDITURES	\$
	TOTAL UNITE	MIZED EXPENDITURES \$20 OR LESS	\$
			1.181.29
	1.	76 TOTAL EXPENDITURES	\$1/10000
***	end of Report***		

Campaign Finance Report Short Form EB-2a State Elections Board	
Spring Fall Special Pre-Primary	Continuing Report due Jan. 31,
Name of Candidate or Committee (in full) Address (number and street) City, State, Zip Scanno Co	Magy Land Magy Land UI 54313
certify that the above named committee or candidat make disbursements, or incur obligations during the balance remains the same as previously reported. The 11.06(9), Stats.	period covered by this report and that the cash
Signature of Committee Treasurer or Candidate	Date Daytime Phone

MAR 2014

SHORT FORM – Use For "No Activity" Reporting Period

Campaign Finance Report Short Form EB-2a State Elections Board				
Spring Fall Special Pre-Primary Spring Fall Special Pre-Election 2014	, $\overline{}$	g Report due Jan. 31 g Report due July 20		
Name of Candidate or Committee (in full)	MHAN C	COMMITTEE	FOR	BETTER GOVERNMENT
Address (number and street) 2444 BA	+BCOCK	_ROAD		
City, State, Zip GREEN B	AY, WI	64313		
I certify that the above named committee or candidate make disbursements, or incur obligations during the p balance remains the same as previously reported. Tr 11.06(9), Stats.	e did not receive o	ontributions or other this report and that t	the cash	
Signature of Committee Treasurer or Candidate	Date 03/11/14	Daytime Phone (920) 49	0-53	18 (w)

SHORT FORM – Use For "No Activity" Reporting Period



Spring Fall Special Pre-Primary Continuing Report due Jan. 31, Pre-Election 2014 Continuing Report due July 20, Name of Candidate or Committee (in full)	Campaign Finance Report Short Form EB-2a State Elections Board	
Name of Candidate or Committee (in full) Andy Nicholson		
Address (number and street) Green bay will 54311 City, State, Zip	Address (number and street)	ndy Nicholson no Venus Dr. Green Bay WI 54311
I certify that the above named committee or candidate did not receive contributions or other income, make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills filing requirements under Sec. 11,06(9), Stats. Signature of Committee Treasurer or Cardidate Date: Daytime Phone	I certify that the above named committee or candid make disbursements, or incur obligations during the balance remains the same as previously reported. 11,06(9), Stats.	e period covered by this report and that the cash This report fulfills filing requirements under Sec.

SHORT FORM – Use For "No Activity" Reporting Period



CAMPAIGN FINANCE REPORT STATE OF WISCONSIN GAB-2

COMMITTEE IDENTIFICATION

Filing Period Name:	Spring Pre-Election 2014		OFFICE USE ONLY
Name of Committee/Corporation:	Covers all activity from 01/0 Friends of Dan Robinson	1/2014 through 03/17/2014	
Street Address:	446 Cook Street		SAB ID: 0105501
City, State and Zip:	De Pere, WI 54115		
SUMMARY OF RECEIPTS A	AND DISBURSEMENTS	Column A This Period	Column B Calendar Year-To-Date
1. RECEIPTS			
1A. Contributions (Includi	ng Loans) from Individuals	\$3,764.43	\$3,764.43
1B. Contributions from Co	ommittees (Transfers-In)	\$0.00	\$0.00
1C. Other Income and Co	mmercial Loans	\$0.22	\$0.22
TOTAL RECEIPTS	(Add totals from 1A, 1B and 1C)	\$3,764.65	\$3,764.65
2. DISBURSEMENTS			
2A. Gross Expenditures		\$1,033.7	\$1,033.71
2B. Contributions to Com	ımittees (Transfers-Out)	\$0.00	\$0.00
TOTAL DISBURSEMENTS	G (Add totals from 2A and 2B)	\$1,033.71	\$1,033.71

CASH SUMMARY

Cash Balance Beginning of Report*	\$1,273.18	
Total Receipts	\$3,764.65	
Subtotal	\$5,037.83	
Total Disbursements	\$1,033.71	
CASH BALANCE END OF REPORT	\$4,004.12	
INCURRED OBLIGATIONS		
(Balance at the Close of This Period-3A)	\$0.00	,
LOANS (Balance at the Close of This Period-3B)	\$0.00	

^{*}Cash Balance as reported by committee

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer:		Signature of Candidate or Treasurer Date: Daytime Phone:	
Robinson, Laura	:	Email: robinsonfcrassembly@gmail.com	
	1		

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2 (Rev. 12/03) This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984, 608-266-8005.

Monetary		. •					
03/15/2014	Doro, Jane	427 E. Briar Lane, Green Bay, WI 54301				\$25.00	\$25.00
	Comment(s): State	Assembly					
03/15/2014	Everson, Catherine	715 Grignon, Green Bay, WI 54301				\$100.00	\$100.00
	Comment(s): State	Assembly					
03/13/2014	Federer, Barb	1905 N. 1100 W, Wolcott, IN 47995				\$50.00	\$50.00
	Comment(s): State	Assembly	-			. [-
03/07/2014	Goddard, Corday	231 North Sixth Street, De Pere, WI 54115				\$25.00	\$25.00
	Comment(s): State	Assembly	1				
03/14/2014	Hagen, Charles	437 MeadowWind Dr., Green Bay, WI 54311			·	\$25.00	\$25.00
	Comment(s): State	Assembly					
02/24/2014	Herro, Steve	Catholic Charities USA, 2050 Ballenger Ave, #400, Alexandria, VA 22314				\$25.00	\$25.00
	Comment(s): State	1					• :
03/11/2014	Jeffreys, Celestine	614 Kellogg St., Green Bay, WI 54303				\$20.00	\$20.00
	Comment(s): State	,1	<u> </u>				
03/12/2014	Kaiver, Leon	3060 Birch Rd, Suamico, WI 54173				\$25.00	\$25.00
	Comment(s): State	Assembly				- 1	
03/11/2014	Kasten, Catherine	405 N. St. Bernard, De Pere, WI 54115				\$50.00	\$50.00
	Comment(s): State	Assembly					
03/14/2014	Kirchman, Beth	714 S Michigan Street, De Pere, WI 54115	. '			\$50.00	\$50.00
erde ap das d	Comment(s): State			<u>, , , , , , , , , , , , , , , , , , , </u>			·
03/10/2014	Kirsch, Daniel	224 Swiss Meadow Lane, Green Bay, WI 54302				\$25.00	\$25.00
	Comment(s): State	e Assembly		:			
03/04/2014	Kneiszel, Jim and Judy	215 Lorrie Way, De Pere, WI 54115				\$100.00	\$100.00
	Comment(s): State						

Monetary	-						1.45
03/04/2014	Schmitz, Bill and Adrian	2410 Ducharme Lane, Green Bay, WI 54301				\$100.00	\$100.00
	Comment(s): State	Assembly	-				
03/14/2014	Schwartz, Helen	1659 River Bend Terrace, #7, Green Bay, WI 54311				\$50.00	\$50.00
	Comment(s): State	Assembly					
03/01/2014	Seroogy, Joe	806 N. Broadway, De Pere, WI 54115				\$50.00	\$50.00
	Comment(s): State	Assembly		<u> </u>			1.
03/14/2014	Sjolie, James Enger	430 Grant St., Apt 155, De Pere, WI 54115			1000 1000 1000 1000 1000 1000 1000 100	\$25.00	\$25.00
	Comment(s): State	Assembly					. 4
03/11/2014	Smith, Joanne	1747 Kimball St., Green Bay, WI 54302			,	\$25.00	\$25.00
a grayugud	Comment(s): State	Assembly					
03/14/2014	Stover, Deb	2576 Huntington Way N., Suamico, WI 54173	UNEMPLOYED			\$200.00	\$200.00
	Comment(s): State	Assembly				-	
03/17/2014	Tikalsky, Mary	1874 Preble Ave., Green Bay, WI 54302				\$10.00	\$10.00
	Comment(s): State	Assembly					
02/27/2014	Van Caster, Judy	1900 Olden Glen, De Pere, WI 54115				\$50.00	\$50.00
di di di di di di di di di di di di di d	Comment(s): State	Assembly	· · · · · · · · · · · · · · · · · · ·				
03/01/2014	Waymouth, Paulette	610 Terry Ho Lane, Monticello, IN 47960				\$25.00	\$25.00
Pagaga ang	Comment(s): State	Assembly	1 2				
03/10/2014	Weaver, Lori M.	2524 Beaumont St., Green Bay, WI 54301				\$25.00	\$25.00
	Comment(s): State	Assembly	 				
03/12/2014	Webb, Mary A	Patrick R & Mary A Webb Rev. Trust, 3086 Par Court, Green Bay, WI 54313				\$25.00	\$25.00
in de la lace A la lace de lace de	Comment(s): State	Assembly					
03/14/2014	Wellens, Helen	2130 Kensington Lane, Green Bay, WI 54311				\$50.00	\$50.00
	Comment(s): State	Assembly			7	1.5	

Non-Monetary (-):	\$0.00	
Loan Forgiven (-):	\$0.00	
Total	\$3,764.43	

RECEIPTS Other Income and Commercial Loans

Complete Committee Name:

Friends of Dan Robinson

Date	Füll Name	Address	An	nount	YTD
Other Income					100000000000000000000000000000000000000
02/28/2014	Harbor Credit Union	800 Weise St., Green Bay, WI 54302	**	\$0.22	\$0.22
	Comment(s): State Assemb	oly - interest income from January 1-March 17			
		To	tal	\$0.22	

Monetary	**		**				
	Comment(s): State Asse	mbly			<i></i>		
03/14/2014	St. Norbert College Digital Print Center	100 Grant St., De Pere, WI 54115			Printing - Copies		\$7.91
14.04 0 b	Comment(s): State Asse	mbly					
03/17/2014	St. Norbert College Digital Print Center	100 Grant St., De Pere, WI 54115			Printing - Copies		\$5.08
	Comment(s): State Asse	mbly			. e	A,	
03/04/2014	St. Norbert College Digital Print Center	100 Grant St., De Pere, WI 54115			Printing - Copies		\$37.66
	Comment(s): State Asse	mbly					
03/05/2014	US Postal Service	300 Packerland, Green Bay, WI 54303			Postage		\$58.97
	Comment(s): State Asse	mbly					
03/04/2014	Democratic Party of Wisconsin	15 N Pinckney, Suite 200, Madison, WI 53703			Mailing List		\$317.98
	Comment(s): State Asse	embly	American Company of the Company of t				
03/04/2014	Marcelle, Darlene	1832 Fiesta Lane, Green Bay, WI 54302			Administrativ e Expenses		\$75.00
	Comment(s): County Bo	ard - returned c	ontribution that was	given before Dec	ember 31, 2013		
03/16/2014	Act Blue	366 Summer Street, Somerville, MA 02144		:	ActBlue Fees		\$54.36
	Comment(s): State Asse	embly - this cove	ers fees from donation	ons dated 2/23/14	-3/16/14		
02/17/2014	Weebly, inc.	564 Pacific Ave., San Francisco, CA 94133			Media - Website Development		\$67.90
02/17/2014	Weebly, Inc.	564 Pacific Ave., San Francisco, CA 94133			Media - Website Development		\$106.53
					Sub Total		\$1,033.71
					Grand Total		\$1,033.71
				No	n-Monetary (-):		\$0.00
					Total		\$1,033.71

ADDITIONAL DISCLOSURE

Incurred Obligations Excluding Loans

Complete Committee Name:

Friends of Dan Robinson

Beginning Incurred Obligation Amount:

\$0.00

Date Full Name Address	Amount	
Grand Total	\$0.0	00

Date Full Name	Amount Paid
Grand T	otal \$0.00
Outstanding Incurred Obligations End of Re	port \$0.00

	ON FINANCE REPO IMITTEES OF WISO		2021223			
Is This Report an Amendment:	🔀 No		EIVED R 2014			
Instructions for completing schedules are on the back of each schedule.						
COMMITTEE IDENTIFICATION		G MA	R 2014			
Name of Committee C: Fizens for Sieber Street Address		S B				
LISO Musters Lane City, State and Zip Code			FFICE USINGALY			
Green Bay, WIT 5431	1		and great water			
Please check if address is different than previously reported,	and complete the Campaign	Registration Statement in	the back of this form.			
NAME OF REPORT						
January Continuing Pre-Primary	Spring Fal	l Special	:			
☐ July Continuing 🂢 Pre-Election 14	Spring	II Special	Termination Report also complete Schedule 4			
SUMMARY OF RECEIPTS AND DISBURSEMENTS 1. RECEIPTS	Column A This Period	Column B Calendar Year-To-Date				
The state of the s	2001 40	226140				
1A. Contributions (Including Loans) from Individuals	\$ 2351, 48	s 2351.48				
1B. Contributions from Committees (Transfers-In)	\$	\$				
1C. Other Income and Commercial Loans	\$	\$				
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 2351.48	\$ 2351.48				
2. DISBURSEMENTS						
2A. Gross Expenditures	\$ 447.48	\$ 447.48	,			
2B. Contributions to Committees (Transfers-Out)	\$	\$				
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	s 447.48	\$ 447.48	1			
CASH SUMMARY						
Cash Balance Beginning of Report	\$ 4031.69	š.	•			
Total Receipts	\$ 2351.48	¥				
Subtotal	s 6343.17	_p o:				
Total Disbursements	\$ 447.48					
CASH BALANCE END OF REPORT	\$ 5935,69					
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$					
LOANS (Balance at the Close of This Period-3B)	\$ 3000.00	41.				
I certify that I have examined this report and to the best of	f un knowledge and balled	it is turn assurant and ass	······································			

		· ·
Type or Print Name of Candidate or Treasurer	Signature of Candidate or Treasurer	Date: 2-12-161
		ן דווכ
I lom Sieller	Romes All	Daytime Phone: 920.680.636
	- G	Daytime Phone: 1-0:00:03-01

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2L (Rev. 12/09) This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk.

69

DISBURSEMENTS Gross Expenditures

Complete Comm	ittee Name	for	Sieber		
Instructions for completing schedules are on the back of each schedule.					
Date	Full Name,	Mailing A	Address and Zip Code	Specifi	

Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
1 / 1 / 1	Fricke Hinting Service	a	165.46
1214	2011 Suth 14 MSG 50220	DOON COND	100,10
	Check if: In-Kind Offset		
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
1 1/4	Office man sh	where bands	9,48
11/17	2350 B. Massin 56 54362	MORINA SENOS	סודוי
Deta	Check if: X In-Kind Offset (rem Suy 164 54 34 2 Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Chapitia Durance of Europalitura	Amount
Date	Of Person or Busineas to Whom Payment is Made	Specific Purpose of Expenditure	Amount
2	IN WOOD IN	hund reser	24,50
2/13/14	530 Bne KU	1 AN - 1 11 2 A	- 14
Date:	Check if: in-Kind Offset Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
Date.	Of Person or Business to Whom Payment is Made		_
2714	Postmenter	Poslage	95,57
, ,		•	•
Date	Check if: 1 In-Kind Offset Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
1 1	Of Person or Business to Whom Payment is Made	- F	
و المام	Yosi-moster	posloge	94.67
14114		1	·
Date	Check if: [ː] In-Kind Offset Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
. , , ,	Of Person of Business to Whom Payment is Made	a s. bus	35.00
2414	1165 Cheshut	prwhys	رر ا
_	1 195 Theshut of the Check it: I in-Kind Offset		
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
1 1 -	Of Person or Business to Whom Payment is Made		22.80
2714	VIII III) (besting 10	pinhus	CC. DU
	OPBC 1195 Chylint Green Buy Check if: 11 In-Kind Offset Green Buy		
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
I = I	S. S. S. S. S. S. S. S. S. S. S. S. S. S		
1 j	Check if: U In-Kind Offset		
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
1 1			
	Check if: [] In-Kind Offset		
		·	
A CONTRACT OF STREET	SUBTOTAL ITE	EMIZED EXPENDITURES THIS PAGE	\$ 441.40
÷,*		TOTAL ITEMATED EXPENDITURES	
	·	TOTAL ITEMSTED EVOCADITIONS	1 %

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	s 441.48
TOTAL ITEMIZED EXPENDITURES	\$
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS	\$ 1.1.7.1.0
TOTAL EXPENDITURES	441,44

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C: HZony for S	reber		
Instructions for completing schedules are on the back of Date Full Name, Mailing Address and Zip Code		Amount	Calendar
Leva West	Occupation, Name and Address of Philospal Place Of Employment (if year-to-date total exceeds \$100)	Ambant	Year-to-Date Total
3414 1434 Sparin ld		70.00	
Now tralino		_0	
Check if: ☐ In-Kind ☐ Loan☐ Conduit Date Full Name, Maifing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place		Calendar
/ / Mi/le De Grand	Of Employment (if year-to-date total exceeds \$100)	75.00	Year-to-Date Total
3614 1404 Sonata Ct		7.5.5	
Gran Bay We			
Check if:	Conduit Name: Cocupation, Name and Address of Principal Place	Amount	Calendar
1 1 Bill Mersis	Of Employment (if year-to-date total exceeds \$100)	_	Year-to-Date Total
3 13:14 2:97) Circle Share Dy		50.00	
Gran Day, WE SUBJE	Conduit Name: Professional Fix Fishly	Lho R.	
Check if: In-Kind Loan Conduit Date Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
// Choo Brankharst	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
3/13/41 2826 Travelone Cr	Sol 5 Vashington SI	100.00	150.00
Gran Bay WE 5431	Grenty WE 5432	10	<i>o</i> .
Check if:	Occupation, Name and Address of Principal Place	Amount	Calendar
1 / Todd Madson	Of Employment (if year-to-date total exceeds \$100)	,	Year-to-Date Total
3/13/4 3642 Stanlad Va		00.00	
New Fraken w2 542	ch Polar a Rockella	d breen Bay	
Check if: In-Kind Loan Conduit	Conduit Name: 1100 Savue 1 174 154063	ļ <i></i>	Calendar
Date Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Year-to-Date Total
Check if: In-Kind Loan Conduit Date Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar
/ / / / / / / / / / / / / / / / / / /	Occupation, Name and Address of Philospa Place Of Employment (if year-to-date total exceeds \$100)	- Tanoun	Year-to-Date Total
Check if: In-Kind Loan Conduit Date Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar
1 1	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
Check if: In-Kind Loan Conduit	Conduit Name:	\$ 3-15,00	-
SUE	TOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 272,00	
707	TOTAL ITEMIZED CONTRIBUTIONS AL UNITEMIZED CONTRIBUTIONS \$20 OR LESS	\$	1
	ONTRIBUTIONS RECEIVED FROM INDIVIDUALS	s 2415 00	1

RECEIPTS Contributions (Including Loans) From Individuals

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Page	UI

Complete Comm	Citizens for Seber			
	completing schedules are on the back of ea			
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
1 1	Jessia Sele	Of Employment (if your to dute total streets)	0.600	ļ
2 112//	•		2500	
2/13/4			Γ	
,				
	Check if: I In-Kind Loan Conduit	Conduit Name:		Calendar
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
1 1	Janse Harren Carner Welly	× h	ا دست سال	
7/18/1	3/64 Hermans Rd		100.00	
2/13/4	New Franker, WI S	1229		
	· · · · · · · · · · · · · · · · · · ·	!		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar
	·A · -	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
	Dels Slaver		20 a	
2/13/14	2576 Hushislan Way)(), u	
7	Svamico, WE 54173			
		Conduit Name:	ļ	
Date	Check if: In-Kind Loan Conduit Full Name, Maiting Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar Year-to-Date Total
1 1	Oute Philland Lineway	Of Employment (if year-to-date total exceeds \$100)		Teal to Bato Total
1 10 1 16	1121 5 Jackson St		35,∞	
2/18/14	Gran Bay, WE SUBU		27,	
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar
Date		Of Employment (if year-to-date total exceeds \$100)	Allount	Year-to-Date Total
' '	Ach Layoun		50.00	
12a11	1337 Augustile Dr	·	ا ۱۳۰٫۵۰	
[2] Za4]	1337 Avenuale by Gran Bay, WE S4313			
	• • •	Conduit Name:		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
1 1	Raigh Meloven	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
:	les lived acquillane		1000	
2/11/14	W 1408 Legacy Lone Ver Due 148 Su 118			
	the like with 500 11	12. 1 00 1		
	Check if: I In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Usices lov Overth	Amount	Calendar
Date		Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Year-to-Date Total
/ /	Michelle Datator			
2/11/14	3781 H.11 CHSL Dr		25.00	
V-1 J. [Orean Buy, WE 54313			
		Conduit Name: Unites for Overly		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
1 1	Jelly Carlson	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
	345 600 11		100.00	
2/11/14	345 DorMan Die Green Bay wi 5430 B	^	100	
	oren bay we say	Conduit Name: Voices for Owelch	İ	
	Check if: In-Kind Loan Conduit	Conduit Name: OF ILE 5 VOV WEIGHT		
	SUBT	OTAL ITEMIZED CONTRIBUTIONS THIS PAGE	s 395,∞	
	<i></i>		\$	
		TOTAL ITEMIZED CONTRIBUTIONS		
į	TOTA	L UNITEMIZED CONTRIBUTIONS \$20 OR LESS	\$	
ŕ	TOTAL CO	NTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$	·

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Complete Coma	Citizens for S	elser		
	r completing schedules are on the back of ea			
Date / /	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
21314	906 Cedarrew C+		100.00	
	G.B. Jul 5431			
	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code Mory Gink be ush	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		Calendar Year-to-Date Total
2 1314	1507 N Bay Hishlands		100.00	
85 1711	G.B, WS 54311		700.	
	Check if: In-Kind I Loan Conduit	Conduit Name:		
Date	Check if: In-Kind Land Conduit Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
1 1	(arla Schroeder	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
7 12 11.	1014 willow 12 745	·	75,00	
213/4	GB, 48 94364			
	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:		
Date	Tom Vustr Hama Cloud	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
2 1314	3341 Beach Ln	₹ <i>\</i> € <i>\</i> € ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹	50.00	
~ · ». ·	G-b, WZ 54311		JU,	
	Check if: tn-Kind Loan Conduit	Conduit Name:		
Date	Check if: ☐ In-Kind ☐ Loan☐ Conduit Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar Voor to Date Total
I = I	Rele Sicore	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
214 16	10 by 376		3500	
215/9	Fish Crelly W8 54212		·	
	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:		
Date / /	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
21514	- 5-0-		2500	
4114	GILL Kellogy St. Green Bay, WI SUS03			
-	Check if: In-Kind Loan Conduit	Conduit Name:		
Date / /	Full Name, Mailing Address and Zip Code Kin J Paula Plawan	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
	960 CaleryenCt		100.00	
2/13/4	Green Bay, W. S434			
,	Check if: I In-Kind I Loan Conduit	Conduit Name:		
Date	Full Name Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
2 1214	2626 Traverhie Ct		50,00	
21314	G, B, Wf 5434			
	Check if: In-Kind	Conduit Name:		
	SUBTO	OTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 485.00	
* .		TOTAL ITEMIZED CONTRIBUTIONS	\$	
- 1 - 1 - 1	TOTAL	UNITEMIZED CONTRIBUTIONS \$20 OR LESS	\$	
	TOTAL COM	ITRIBUTIONS RECEIVED FROM INDIVIDUALS	\$	71
		5 of 7		

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Complete Com	mittee Name			
	CHIZENS for Suber			
Instructions fo	or completing schedules are on the back of ear Full Name, Mailing Address and Zip Code	ach schedule. Occupation, Name and Address of Principal Place	Amount [Calendar
, ,	Tom Selv	Of Employment (if year-to-date total exceeds \$100)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Year-to-Date Total
1214	480 Members Lane	Solk	Rud	9.48
1 - 7 1		Y.	9.48	
	Green Bay, WE S434			
Date	Check if: An-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place		Calendar
	Α	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
2 1314	Ben Vielarg		50,00	
	25621 Collein SI			
	Oak Pak, MR 482	3 ገ		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:	A	Calendar
l date	Patrick Coskilla	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Year-to-Date Total
21314	412U N Locust		50,00	
メリカ	1			
,	GB 54304			
Data	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:		
Date		Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
1 1	RISA De Laune			
21314	341 Lavere Dr #4 Green Bay, WP 54311		Z0.00	
	Green Bay, W. 54311			
	Check if: In-Kind L Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code John J. Sally, S. elby	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
- 10 1	574 Wooded Hils Irl		(C \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
21314	! . A	refuel	250.00	
	Over Da, wil 54155			
	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:		
Date		Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
$I = I_{\perp}$	Jame Itanson			
21314	3489 Black and Kin		2500	
2 1	Green Bay, W.C. 54311			
	Check if: ☐ In-Kind ☐ Loan☐ Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
9 11 11	John Kellmer 2758 Pine Grove Ko De Dave, Not 54115	,		
21314	2758 Pine Grave KU		50.00	
	De Pere, wif 54115			
	Check if: In-Kind Loan Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
	446 Cook SL		-0.13	
213/4			75,00	
	De Du, WE Suls			•
	Check if: In-Kind In Loan Conduit	Conduit Name:		
	SUBT	OTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 529.48	
2		TOTAL ITEMIZED CONTRIBUTIONS	\$	
<u>;</u> ;	TOTAL	UNITEMIZED CONTRIBUTIONS \$20 OR LESS	\$ 12.00	
		·	s 541, 48	
	TOTAL COP	NTRIBUTIONS RECEIVED FROM INDIVIDUALS	_ viii v	

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Complete Com	mittee Name	101	· · · · · · · · · · · · · · · · · · ·		
	(itrens l	or Jul	0 -1		
Instructions fo	or completing schedules are on Full Name, Mailing Address and	the back of ea		Amount	Calendar
l l	Chuck & Judy 1	ledown:	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	100, 00	Year-to-Date Total
21314	2971 Urham 6, P. W. Su 3	<0 41		100,00	
	1	· ·	Conduit Name:		
Date	Check if: In-Kind Loan Full Name, Mailing Address and	Zip Code	Occupation, Name and Address of Principal Place		Calendar Year-to-Date Total
1 1	Jim Sull Hola,	. <i>/</i> /\	Of Employment (if year-to-date total exceeds \$100)		Teal-10-Date Total
213/4	496 Menly H	r/(KO		50,00	
	G.B. WE	54302			
Date	Check if: In-Kind Loan Full Name, Mailing Address and	Conduit	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar
Date	Tun Name, wassing Address and	Blognen		Amount	Year-to-Date Total
13/4	100 Den 8291	,		C = 29	
21511	Gran Boy WI	9 50,250		600	
	1		Conduit Name:		
Date	Check if: In-Kind Loan Full Name, Mailing Address and		Occupation, Name and Address of Principal Place	Amount	Calendar Year-to-Date Total
1 1	Isabell & Keler		VV		
21319		<u>ئ</u>		2500	
- "	C.B. ar				
Date	Check if: In-Kind Loan	Conduit Zip Code	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar
1 1	Carol le Groot		Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
71314	265 Envely	Lh		100,00	
2(7)	GB, W2 50			,00	
	Check if: In-Kind I Loan		Conduit Name:		
Date	ه ۱/۱ ا	$\sim i$	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
	Arlyn & May 3220 E Agran	Sidar		50,00	
2 1319	Sophun, WE				
	Check if: In-Kind I Loan	1	Conduit Name:		
Date	Full Name, Mailing Address and	Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
I = I'	Ours Ziesewer 1210 Mant Many G. B. WE	Δ.	or Employment (ii year-to-date total exceeds \$4100)	100.00	. San to Bailo Hotel
2 13/4	1210 Mant Mary	OV		100,55	
·					
Date	Check if: In-Kind Loan Full Name, Mailing Address and	Conduit Zip Code	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar
1 1	Jame Wall		Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
0.7 111	1241 Lane St			100.00	
213/4	G.B. WE S	1301		'03'	
î.	Check if: In-Kind Loan	Conduit	Conduit Name:		
		SUBT	OTAL ITEMIZED CONTRIBUTIONS THIS PAGE	s 585, w	
		:	TOTAL ITEMIZED CONTRIBUTIONS	\$,
nd of	Report***	TOTAL	UNITEMIZED CONTRIBUTIONS \$20 OR LESS	\$	
		TOTAL CO	NTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$	71

Campaign Finance Report Short Form EB-2a State Elections Board		
Spring Fall Special Pre-Primary Spring Fall Special Pre-Election		Report due Jan. 31,
Name of Candidate or Committee (in full) DAULD STEFFEN Address (number and street) 1593 LGD STONE TRAIC City, State, Zip GREEN BAT, UI	- 543B	
I certify that the above named committee or candidate make disbursements, or incur obligations during the p balance remains the same as previously reported. Th 11.06(9), Stats.	eriod covered by	this report and that the cash
Signature of Committee Treasurer or Candidate FB-2a (Rev. 9/95) (Reformatted 3/98) (V2K 9/99)	Date 3 17 14	Daytime Phone 920. 246_0/07

SHORT FORM – Use For "No Activity" Reporting Period



· ·	ON FINANCE REPO MITTEES OF WISC	RT ONSIN	RECEIVED MAR 2014 Sandra L. Juno Brown CE USE ONLY
Is This Report an Amendment: Yes	X No	3	271
Instructions for completing schedules are on the ba	ack of each schedule.	87.87	RECEIVED 8
COMMITTEE IDENTIFICATION	 	21.0	MAR 2014 8
Name of Committee Friends of Unider Lo	och	15	Sandra L. Ivon
Street Address 1422 Beech Tree D	<u>esi.</u> R		FICE USE ONLY
Green BAY, WI 54	304		
Please check if address is different than previously reported, a	and complete the Campaign	Registration Statement in t	he back of this form. 🔲
NAME OF REPORT	•		
January Continuing Pre-Primary Pre-Primary	Spring Fal	l Special	
☐ July Continuing Pre-Election <u>201</u> 4	Spring	II Special	Termination Report also complete Schedule 4
SUMMARY OF RECEIPTS AND DISBURSEMENTS	Column A This Period	Column B Calendar	
1. RECEIPTS		Year-To-Date	
1A. Contributions (Including Loans) from Individuals	\$ 400.00	\$	
1B. Contributions from Committees (Transfers-In)	\$ &	\$	
tC. Other Income and Commercial Loans	\$ \$0	\$	
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 400.00	\$	
2. DISBURSEMENTS			
2A. Gross Expenditures	s 470.80	\$	
2B. Contributions to Committees (Transfers-Out)	\$	\$	
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	s 470.80	\$	
CASH SUMMARY			
Cash Balance Beginning of Report	\$ 999,50		
Total Receipts	s 400.00		
Subtotal	\$ 13 99.50		
Total Disbursements	s 470.80		
CASH BALANCE END OF REPORT	\$ 928.70	er	
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$		
LOANS (Balance at the Close of This Period-3B)	\$		
I certify that I have examined this report and to the best p	1	fit is true, correct and co	mplete.
Type or Print Name of Candidate or Treasurer Sign	ature of Gand date or Treasurer	Date: 3	124/14 020-727 tage

NOTE: The information on this form is required by ss.11.06, 11.70, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2L (Rev. 12/09) This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk.

RECEIPTS Contributions (Including Loans) From Individuals

Page ____ of ____

Complete Committee Name Instructions for completing schedules are on the back of each schedule Date Full Name, Mailing Address and Zip Code Occupation, Name and Address of Principal Place Amount Calendar Of Employment (if year-to-date total exceeds \$100) Year-to-Date Total 2/19/14 Check if: Cln-Kind Loan Conduit Conduit Name: Occupation, Name and Address of Principal Place Calendar Of Employment (if year-to-date total exceeds \$100) Year-to-Date Total John S. Vanderleest 1625 Vernon Ct Green BAY, WI Strad Check if: CIn-Kind Loan Conduit Conduit Name: Full Name, Mailing Address and Zip Code Occupation, Name and Address of Principal Place Amount Calendar Year-to-Date Total Of Employment (if year-to-date total exceeds \$100) \$100.00 Conduit Name Occupation, Name and Address of Principal Place Calendar Amount Year-to-Date Total Of Employment (if year-to-date total exceeds \$100) Check if: In-Kind Loan Conduit Conduit Name: Full Name, Mailing Address and Zip Code Date Occupation, Name and Address of Principal Place Amount Calendar Of Employment (if year-to-date total exceeds \$100) Year-to-Date Total Check if: In-Kind I Loan Conduit
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DISBURSEMENTS Gross Expenditures

Complete Committee Name
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Instructions for completing schedules are on the back of each schedule. Amount Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Of Person or Business to Whom Payment is Made 7 S. Oreidast, Green BAY LUT Full Name, Mailing Address and Zip Code
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End of Report

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS

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CAMPAIGN FINANCE REPORT LOCAL COMMITTEES OF WISCONSIN		RT ONSIN	21222324 25 25 25 25 25 25 25 25 25 25 25 25 25
Is This Report an Amendment: Yes	No		BECEN EN
Instructions for completing schedules are on the ba	ick of each schedule.	167,	/ MARY SILVER
COMMITTEE IDENTIFICATION		/g	50nd (014)
Name of Committee TASON WISNESIU For Street Address	Bravi County S	ONSIN September	Brown County Cierk FFICE USE ONLY
PO BOX 28242			V 8 L 9 9 V
City, State and Zip Code Geen Boy, WIS	4324		
Please check if address is different than previously reported, a	and complete the Campaign l	Registration Statement in	the back of this form,
NAME OF REPORT	·		
January Continuing Pre-Primary Pre-Primary	Spring Fall	Special	☐ Termination Report
July Continuing Pre-Election 2019	Spring Fal	l Special	also complete Schedule 4
SUMMARY OF RECEIPTS AND	Column A	Column B	
DISBURSEMENTS	This Period	Calendar	
1. RECEIPTS		Year-To-Date	4
IA. Contributions (Including Loans) from Individuals	\$ 455647	\$ 5,182,56	
IB. Contributions from Committees (Transfers-In)	\$	\$ '	
IC. Other Income and Commercial Loans	\$	\$ —	
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 1,556143)	\$ 5,182,56	
2. DISBURSEMENTS	, ,		
2A. Gross Expenditures	\$ 1,089.75	\$ 4,617,64	
2B. Contributions to Committees (Transfers-Out)	\$ -	\$	_
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 1,089.75	\$4,617,64	_
CASH SUMMARY			1
Cash Balance Beginning of Report	\$ 101.20		
Total Receipts	\$ 1,556,47	. * .	N
Subtotal	s 1,657.67		
Total Disbursements	s 1, 089,75		
CASH BALANCE END OF REPORT	\$ 567.92		
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$	er er	
LOANS (Balance at the Close of This Period-3B)	\$ 3,729.56		
I certify that I have examined this report and to the best o	f my knowledge and belief	it is true, correct and c	complete.

Type or Print Name of Candidate or Treasurer	Signature of Candidate or Treasurer	Date: -> 1011/01/11/
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NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

ss.11.60, 11.61, Wis. Stats.

/ of 9

GAB-2L (Rev. 12/09) This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk.

RECEIPTS Contributions (Including Loans) From Individuals

Page of 3

Complete Con	nmittee Name	e D (1) -		
	(TASON) WISNESH+	er Kraw and spens		
	or completing schedules are on the back of e	ach schedule.		
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RECEIPTS Contributions (Including Loans) From Individuals

Page 2 of 3

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RECEIPTS Contributions (Including Loans) From Individuals

Page <u>3</u> of <u>3</u>

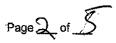
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DISBURSEMENTS Gross Expenditures

Page 1 of 5

Instructions for completing schedules are on the back of each schedule. Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made Website fee Check if: In-Kind Offset Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Of Person or Business to Whom Payment is Made 11 11 11 Check if:
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DISBURSEMENTS Gross Expenditures



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DISBURSEMENTS Gross Expenditures

Page 3 of 5

Complete Committee Name

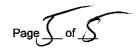
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Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
317141	N J	h	182,2
			410000
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Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
3 11 14	Of Person or Business to Whom Payment is Made M	u n	#2.87
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	The state with		
	sú	BTOTAL ITEMIZED EXPENDITURES THIS PA	AGE \$ 48153
•		TOTAL ITEMIZED EXPENDITU	RES \$
	тот	TAL UNITEMIZED EXPENDITURES \$20 OR L	ESS \$
		TOTAL EXPENDITU	BEC t
		TO FAL EXPENDITU	7 14 9
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DISBURSEMENTS Gross Expenditures



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Instructions for	completing schedules are on the back of each schedule.	Carrie School of the Carrie of	
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
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0"'(US POST OTHE	POSTAGE	150001
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Date	Check if:	Consider Durance of Funnshitus	Amount
1 10.10	Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
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1			11100
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Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount '
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21011		n 9	\$10029
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Date 10 L	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
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السيسام	Of Person or Business to Whom Payment is Made	Calidada	<i>A</i>
23141	American Majority	Conaig SE	\$ 30.00
	· · · · · · · · · · · · · · · · · · ·	1777/h/hg	1, 0
	Check if: In-Kind Offset		
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
2,001/9	Of Person or Business to Whom Payment is Made	11 4	# m
13	\mathcal{N}		\$ 15,00
10	_		
Date	Check if: C In-Kind Offset Full Name, Mailing Address and Zip Code		
2.16.16	Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
2'4'141	Government Accounts lity	Voter LIST	\$ 30,00
	Bara		7 -
ŧ	Check if: In-Kind Offset		
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
111111	Of Person or Business to Whom Payment is Made	marroter	the
α	US Hagiean	MATRETY	4 da 30
•	· · · · · · · · · · · · · · · · · · ·	Materials,	7.50
Dot-	Check if: In-Kind Offset		
Date 1//	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
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			130.110
	SUBTOTALIT	EMIZED EXPENDITURES THIS PAGE	\$ 123173
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•		TOTAL ITEMIZED EXPENDITURES	\$
	TOTAL UNITER	MIZED EXPENDITURES \$20 OR LESS	\$
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DISBURSEMENTS Gross Expenditures



Complete Comm	ittee Name HSAN WISMESKI For 3	R. C. C		
Instructions for	completing schedules are on the back of	each schedule	penyse y	
Date	Full Name, Mailing Address and Zip Code	· · ·	Specific Purpose of Expenditure	Amount
14	Of Person or Business to Whom Payment is	Made	DAXIX MX	A- 1
1754	WTAQ Midwest	Communications	RADIO AD	# 3/8100
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	Check if:		Specific Purpose of Expenditure	Amount
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is I	Made	Specific Purpose of Experiorate	Amount
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	Check if: ☐ In-Kind Offset			
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	Check if: U In-Kind Offset		On a 18 a Drawn of East and the sea	Amount
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is I	Made	Specific Purpose of Expenditure	Amount
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				01/00
		SUBTOTAL ITEM	IZED EXPENDITURES THIS PAGE	\$ 34/162
•		7	TOTAL ITEMIZED EXPENDITURES	\$
ے ملبطوعات	d of Donort**			
En	d of Report	TOTAL UNITEMIZ	ED EXPENDITURES \$20 OR LESS	\$
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<u> </u>		•	TOTAL EXPENDITURES	\$ 1,089110